## SCHOOL SHOULD DETACH AND RETAIN THIS FORM

SOCIAL SECURITY ADMINISTRATION

Field Office Name and Address				

Form Approved OMB No. 0960-0105

## NOTICE OF CESSATION OF FULL-TIME SCHOOL ATTENDANCE

NAME OF SOCIAL SECURITY BENEFICIARY	DATE OF BIRTH	SOCIAL SECURITY	CLAIM NUMBER	
STUDENT'S SOCIAL SECURITY NUMBER	INDIVIDUAL IDENTIFI TO BE A FULL-TIME S SCHOOL ON		Month, Day, Year	
NAME AND ADDRESS OF SCHOOL	REASON:  1. Withdrawal, suspension or expulsion 2. Changed to PART-TIME status 3. Failed to continue in full-time attendance at start of new term (or new school year) 4. Other (Explain)			
	SIGNATURE (or facsimile) OF SCHOOL OFFICIAL			
	TITLE		DATE	

## IMPORTANT INFORMATION ABOUT THIS FORM

One of the conditions a child between 18 and 19 must meet to receive Social Security benefits is that he/she be a full-time student. For Social Security purposes, a student in "full-time attendance" is one who is attending an elementary or secondary school, and is enrolled in a day or evening non-correspondence course of at least 13 weeks' duration. In addition, the student must be scheduled to attend at the rate of at least 20 hours weekly, and be carrying a subject load which is considered full-time for day students under the school's standards and practices. This form contains the name, date of birth, and Social Security claim number of a child beneficiary who tells us that he/she is (or will be when school resumes) a full-time student at your school.

Please hold this form until the student is no longer a full-time student at your school (whether this is during the current school year, at the start of the next school year, or any time after that). Then, enter the date he/she stopped being a full-time student, check the appropriate box above and return the completed form to the Social Security office shown above. You should not return the form to report graduation or to report that attendance stopped for a scheduled break (e.g., summer break) unless the student is not expected to return from a break.

If there is any question as to whether a student's attendance is full or part-time, please apply the usual criteria followed by your school. You should not complete the form for a student who completes one school year as a full-time student unless he/she does not return, or indicates that he/she will not return, to full-time attendance at the beginning of the next school year.

The people in your Social Security office will be glad to help you with any questions concerning these forms or any other questions you have about Social Security.

Thank you for your cooperation.